	PATEN		cdive Oct	ober 1, 20	003	TION REC	ORD		Applica;	ion of	Docket Nu	8
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OI		R THAN ENTITY
Ľ	OTAL CLAIM	S · ·	<u> </u>		·		· RA		FEE		RATE	FEE
FOR			MIMBE	A FILED	MUM	NATIO REBINU		BASIC F	EE 385.0		BASIC FEI	770.00
TC	OTAL CHARGI	ABLE CLAIMS	Ţ.,	ninus 20=	•	•		X3 9-	.	OF	-	
INC	EPENDENT	CLAIMS		inus 3 =	٠			X43a		-1		<del> </del>
M	LTIPLE DÉPE	NDENT CLAIM	PRESENT	ESENT					+-	-J°F		<del>                                     </del>
"If the difference in column 1 is less than zero, enter "0" in column 2								+145=		JOF		
		•		TOTAL	L.	JOR		<u> </u>				
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
		CLADAS REMAINING	T : :	HIGHE	ST	PRESENT	ſ		ADDI	٦		ADDI-
		AFTER AMENDMENT		PAID F	USLY			RATE	TIONAL FEE.	- I	RATE	TIONAL
A HUNDREN A	Total	. 10	Minus	Id	.5	. —		X\$ 9=		OR	X\$18=	, , , ,
	independent	1- '5 <u>-</u>	Minus	I	?	•	.	X43=	1=	OR	X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1=	_		<del></del>
		•			•	•	L	+145=	$\perp$	OR	+290=	
	•	_(Column 1)			_ ~	10 at min 10	A	OUT. PEE		JOR	ADDIT, FEE	
T		CLAMIS		(Column	SY	(Column 3)	Г		ADD1-	7		ADDI-
		REMARKING AFTER AMENDMENT	İ	PREVIOL	ISLY.	PRESENT EXTRA	1	RATE	TIONAL		RATE	TIONAL
ħ	l'otal	-1/0	Minus	PAID FO	6		٥	56	FEE	1	X\$18=	FEE
1718	ndependent	•6	Minus	in S	<u> </u>	- /		रधुक	F	OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							AA3a_	100	OR	X86=	
+145•										OR	+290=	
							AD	TOTAL DIT. FEE	100	OR	TOTAL ADDIT, FEE	
_		(Column 1)		(Column		(Column 3)			•			•
ľ		CLAIMS REMAINING		HIGHES NUMBE		PRESENT	Г		ADDI-	1		ADDI-
Ŀ		AFTER :AMENDMENT		PREVIOUS PAID FO		EXTRA	'	RATE	TIONAL FEE		RATE	TIONAL
Tr	Mai		Minus	~		•	1	<b>(5 3=</b>	155		X\$18=	
_	dependent	•	Minus	***		•	$\vdash$			OR		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X43.										OR	X86=	
+145 m											+290=	
180	the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL											
he	- myres num Highest Numb	ber Previously Pail er Previously Paid	s Hor' IN THIS For' (Total or	i SPACE is le: Indépendenti	es than is the h	3, enter "3." Lightest number (:		-	rooriate box		DOIT. FEE L Ma 1.	